with the full list of names. Do not include addresses here.)

United States District Court

US DISTRICT COURT WESTERN DISTRICT OF NC

for the

We stern District of North Carolina Division **CURTIS ANTHONY** 3:25-cv-193-FDW Case No. (to be filled in by the Clerk's Office) Plaintiff(s) (Write the full name of each plaintiff who is filing this complaint. Jury Trial: (check one) Yes If the names of all the plaintiffs cannot fit in the space above, please write "see attached" in the space and attach an additional page with the full list of names.) TRUIST FINANCIAL BANK et,al. Defendant(s) (Write the full name of each defendant who is being sued. If the names of all the defendants cannot fit in the space above, please write "see attached" in the space and attach an additional page

COMPLAINT FOR VIOLATION OF CIVIL RIGHTS

(Non-Prisoner Complaint)

NOTICE

Federal Rules of Civil Procedure 5.2 addresses the privacy and security concerns resulting from public access to electronic court files. Under this rule, papers filed with the court should not contain: an individual's full social security number or full birth date; the full name of a person known to be a minor; or a complete financial account number. A filing may include only: the last four digits of a social security number; the year of an individual's birth; a minor's initials; and the last four digits of a financial account number.

Except as noted in this form, plaintiff need not send exhibits, affidavits, grievance or witness statements, or any other materials to the Clerk's Office with this complaint.

In order for your complaint to be filed, it must be accompanied by the filing fee or an application to proceed in forma pauperis.

I. The Parties to This Complaint

A. The Plaintiff(s)

Provide the information below for each plaintiff named in the complaint. Attach additional pages if needed.

Name	CURTIS ANTHONY			
Address	5600 Gratz Street			
	Philadelphia	PA	19126	
	City	State	Zip Code	
County	Philadelphia			
Telephone Number	267 401-5647			
E-Mail Address				

B. The Defendant(s)

Defendant No. 1

Provide the information below for each defendant named in the complaint, whether the defendant is an individual, a government agency, an organization, or a corporation. For an individual defendant, include the person's job or title (if known) and check whether you are bringing this complaint against them in their individual capacity or official capacity, or both. Attach additional pages if needed.

TRUIST FINANCIAL BANK etc,al. Name **BANK** Job or Title (if known) 214 N. TRYON Street. STE# 3 Address Charlotte NC 28202 Zip Code City State Mecklenburg County Telephone Number 336 733-2000 E-Mail Address (if known) N/A Official capacity Individual capacity Defendant No. 2 Name Job or Title (if known) Address City State Zip Code County Telephone Number E-Mail Address (if known)

Individual capacity

Official capacity

Pro Se 1	5 (Rev. 12)	(16) Complaint for Violation of Civil Rights (Non–Pr	risoner)					
		Defendant No. 3 Name Job or Title (if known) Address						
		County Telephone Number E-Mail Address (if known)	City	State	Zip Code			
		Defendant No. 4 Name Job or Title (if known) Address	Individual capacity	Official capa	acity			
		County Telephone Number E-Mail Address (if known)	City	State	Zip Code			
			Individual capacity	Official capa	acity			
II.	Basis	for Jurisdiction						
	immur Federa	nder 42 U.S.C. § 1983, you may sue state or local officials for the "deprivation of any rights, privileges, or munities secured by the Constitution and [federal laws]." Under <i>Bivens v. Six Unknown Named Agents of ideral Bureau of Narcotics</i> , 403 U.S. 388 (1971), you may sue federal officials for the violation of certain institutional rights.						
	A.	Are you bringing suit against (check all that apply):						
		Federal officials (a <i>Bivens</i> claim) State or local officials (a § 1983 claim)						
	B.	Section 1983 allows claims alleging the "deprivation of any rights, privileges, or immunities secured by the Constitution and [federal laws]." 42 U.S.C. § 1983. If you are suing under section 1983, what federal constitutional or statutory right(s) do you claim is/are being violated by state or local officials? Under I (The Plaintiff's) 14th amendment (Due Process) is connected to this issue, since under Article 1, subsection 22B-1(d).						
	C.	Plaintiffs suing under <i>Bivens</i> may on are suing under <i>Bivens</i> , what constitution officials?						

D. Section 1983 allows defendants to be found liable only when they have acted "under color of any statute, ordinance, regulation, custom, or usage, of any State or Territory or the District of Columbia." 42 U.S.C. § 1983. If you are suing under section 1983, explain how each defendant acted under color of state or local law. If you are suing under *Bivens*, explain how each defendant acted under color of federal law. Attach additional pages if needed.

Under color of law, TRUIST FINANCIAL BANK etc,al., failed to protect I (The Plaintiff's) personal information by a third-party having access obtaining/retrieving I (The Plaintiff's) personal information without I (The Plaintiff) not signing a/an opted-out notice giving approval of such.

III. Statement of Claim

State as briefly as possible the facts of your case. Describe how each defendant was personally involved in the alleged wrongful action, along with the dates and locations of all relevant events. You may wish to include further details such as the names of other persons involved in the events giving rise to your claims. Do not cite any cases or statutes. If more than one claim is asserted, number each claim and write a short and plain statement of each claim in a separate paragraph. Attach additional pages if needed.

- A. Where did the events giving rise to your claim(s) occur?
 In Philadelphia,Pa.
- B. What date and approximate time did the events giving rise to your claim(s) occur? January 2024
- C. What are the facts underlying your claim(s)? (For example: What happened to you? Who did what? Was anyone else involved? Who else saw what happened?)
 I (The Plaintiff) personal information was accessed by a third-party, while doing business with this Corporation/Entity without I (The Plaintiff) knowing about it.

IV. Injuries

If you sustained injuries related to the events alleged above, describe your injuries and state what medical treatment, if any, you required and did or did not receive.

I (The Plaintiff) have a mental injury, by this Corporation who I trusted to do business with, caused I (The Plaintiff) to be in debt by doing fraudulent activities. I (The Plaintiff) cannot afford to have the necessities because of credit problems that this Corporation/Entity has caused.

V. Relief

State briefly what you want the court to do for you. Make no legal arguments. Do not cite any cases or statutes. If requesting money damages, include the amounts of any actual damages and/or punitive damages claimed for the acts alleged. Explain the basis for these claims.

Per Person of Declaratory Damages \$100,000.00; Per Person of Monetary Damages \$100,000.00; Per Person of Compensatory Damages \$100,000.00; Per Person of Punitive Damages \$100,000.00.

VI. Certification and Closing

Under Federal Rule of Civil Procedure 11, by signing below, I certify to the best of my knowledge, information, and belief that this complaint: (1) is not being presented for an improper purpose, such as to harass, cause unnecessary delay, or needlessly increase the cost of litigation; (2) is supported by existing law or by a nonfrivolous argument for extending, modifying, or reversing existing law; (3) the factual contentions have evidentiary support or, if specifically so identified, will likely have evidentiary support after a reasonable opportunity for further investigation or discovery; and (4) the complaint otherwise complies with the requirements of Rule 11.

A. For Parties Without an Attorney

I agree to provide the Clerk's Office with any changes to my address where case—related papers may be served. I understand that my failure to keep a current address on file with the Clerk's Office may result in the dismissal of my case.

	Date of signing:	03-10-2025	
	Signature of Plaintiff Printed Name of Plaintiff	Curtis anthony	
В.	For Attorneys		
	Date of signing:		
	Signature of Attorney		
	Printed Name of Attorney		
	Bar Number		
	Name of Law Firm		
	Address		
		City State Zip	Code
	Telephone Number		
	E-mail Address		